UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVA 3235-0076 OMB Number April 30, 2008 Expires: Estimated average burden

hours per response

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC USE ONLY					
Prefix	Serial 1				
	<u>_</u>				
DA	RECEIVED				

16.00

Fed 161 SECTION	UNIFORM L	IMITED OFF	ERING E	XEMPTION	
Name of Offering (check if this is an amer		as changed, and in	dicate change	e.)	
Partnership Interests of Harbor Partne	rs I, L.P.				
Filing Under (Check box(es) that apply): Type of Filing: New Filing	Rule 504 Amendment	Rule 505	⊠ Rule 5	06 Section	on 4(6) ULOE
	A. BASIC	DENTIFICAT	ION DATA		
1. Enter the information requested about the	issuer				
Name of Issuer (check if this is an amendment Harbor Partners I, L.P.	ent and name has	changed, and indic	ate change.)		
Address of Executive Offices 152 West 57 th Street, 48 th Floor, New Yo		d Street, City, State	e, Zip Code)	Telephone Nun 212-262-4268	07077126
Address of Principal Business Operations (if different from Executive Offices)	(Number and	d Street, City, State	e, Zip Code)	Telephone Number	(Including Area Code)
Brief Description of Business					
Private Investment Fund					
Type of Business Organization		. 5			THUCESSED
	ership, already forn ership, to be forme		r (please spe	cify):	SEP 1 4 2007
Actual or Estimated Date of Incorporation or O Jurisdiction of Incorporation or Organization:	(Enter two-lette	Month Year 02 89 er U.S. Postal Serv ; FN for other fore	rice abbreviat		THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a	loss of the federal exemption.	Conversely, failure to file the	e appropriate
federal notice will not result in a loss of an available state exemp	ption unless such exemption is	predicated on the filing of a fe	ederal notice.

Persons who respond to the collection of information contained in this form are not

SEC 1972 (6-02) required to respond unless the form displays a currently valid OMB control number.

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2. Enter the information re	equested for the	following:			
Each promoter of to	the issuer, if the	issuer has been organize	d within the past five year	s;	
 Each beneficial ov the issuer; 	vner having the	power to vote or dispose	, or direct the vote or disp	osition of, 10%	or more of a class of equity securities of
Each executive off	ficer and directo	r of corporate issuers and	of corporate general and	managing partn	ers of partnership issuers; and
 Each general and r 	nanaging partne	er of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		<u>.</u>		
Goldman, Jay. G.	,				
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)		
12 Windsor Drive, Old We	estbury, NY 11	568			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	· 			-
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ress (Number an	d Street, City, State, Zip	Code)		
	(Use b	lank sheet, or copy and u	se additional copies of thi	s sheet, as neces	ssary)

A. BASIC IDENTIFICATION DATA

					J	B. INFOR	MATION	ABOUT	OFFERI	NG				•	
1. Has	s the issu	er sold, or	does the is	ssuer inten	d to sell, to	non-accre	edited inve	stors in th	is offering	?				Yes	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.								L							
· · · · · · · · · · · · · · · · · · ·								\$ <u>250,000</u>	t '						
		ease or rec													
3. Do	es the off	ering perm	nit joint ov	vnership of	f a single u	nit?	•••••	•••••	•••••	***************************************	••••••	••••••	••••••	Yes ⊠	No
rem pers thai	uneration son or ag	n for solici	itation of proker or de	purchasers ealer regist	in connectered with	tion with : the SEC a	sales of se ind/or with	curities in a state or	the offerin	ng. If a pet t the name	rson to be of the bro	e listed is a oker or dea	on or similar in associated iler. If more nat broker or		-
Full Nan	ne (Last r	name first,	if individu	ual)											
Business	or Resid	lence Addi	ress (Num	ber and St	reet, City,	State, Zip	Code)								1
Name of	Associat	ed Broker	or Dealer												1
States in	Which P	erson List	ed Has So	licited or I	ntends to S	Solicit Pure	chasers			•			-		·
	(Check	"All State	e" or checi	k individu	al States)								•••••	🗆 All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [W1]	(HI) [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	^	l I
Full Nan	ne (Last r	name first,	if individu	ıal)											I
Business	or Resid	ence Addı	ress (Numl	ber and St	reet, City,	State, Zip	Code)								<u> </u>
Name of	Associat	ed Broker	or Dealer												:
States in	Which P	erson List	ed Has So	licited or I	ntends to S	Solicit Pur	chasers	·							
(Ch	eck "All	States" or	check indi	ividual Sta	tes)				•••••					All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Nam	ne (Last n	ame first,	if individu	ual)			·								
Business	or Resid	ence Addr	ess (Numl	ber and Str	eet, City,	State, Zip	Code)								ì
Name of	Associat	ed Broker	or Dealer							****			<u></u>		
States in	Which P	erson Liste	ed Has Sol	licited or I	ntends to S	Solicit Purc	chasers								
(Ch	eck "All	States" or	check indi	ividual Sta	tes)	••••••	**************	•••••	••••••	•••••	•••••	••••••		🗖 Ail :	States
	(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		l I

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PROC	EEI	os
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
Type of Security	Aggregate Offering Price		Amount Already Sold
Debt	\$		\$
Equity	\$		\$
☐ Common ☐ Preferred			•
Convertible Securities (including warrants)	\$		\$
Partnership Interests	\$ 500,000,000		\$ 20,287,306.25
Other (Specify)	\$		\$
Total	\$ 500,000,000		\$20,287,306.25
		_	I
Answer also in Appendix, Column 3, if filing under ULOE.			1
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			;]
	Number Investors		Aggregate Dollar Amount of Purchases
Accredited Investors	38		\$_20,287,306.25!
Non-accredited Investors			\$
Total (for filings under Rule 504 only)			\$
Answer also in Appendix, Column 4, if filing under ULOE.			1
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			;
Type of Offering	Type of Security		Dollar Amount Sold
Rule 505		_	\$
Regulation A			\$
Rule 504		_	\$
Total			\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.			1
Transfer Agent's Fees			\$
Printing and Engraving Costs			\$
Legal Fees		\boxtimes	\$10,000
Accounting Fees	•••••	\boxtimes	\$ 10,000
Engineering Fees			\$i
Sales Commissions (specify finder's fees separately)			\$
Other Expenses (identify)	••••••		\$
Total	•••••	\boxtimes	\$ 20,000
h Entartha difference between the appropriate official series in several			I
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$ <u>499,980,000</u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proce proposed to be used for each of the purposes shown, purpose is not known, furnish an estimate and check the estimate. The total of the payments listed must exproceed to the issuer set forth in response to Part C – C	If the amount for any he box to the left of the jual the adjusted gross)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Óff Direc	nents to ficers, ctors, & filiates	Paymen Other	
	Salaries and fees		□ \$. 🗆 \$	
	Purchase of real estate		S		. 🗆 \$	
	Purchase, rental or leasing and installation of machiner	y and equipment	S		. 🗆 \$	<u>i</u>
	Construction or leasing of plant buildings and facilities		S		. 🗆 \$	I
	Acquisition of other businesses (including the value involved in this offering that may be used in exchange of securities of another issuer pursuant to a merger)	for the assets	 \$		□ \$	
	Repayment of indebtedness		□ \$		\$	
	Working capital		□ \$			
	Other (specify): Investment Capital		⋈ \$499,98	30,000	□ \$	
						1
	Column Totals		⊠ \$499.98	80.000	□ \$	
	Total Payments Listed (column totals added)				9,980,000	1
,		•				!
	D. FEDE	RAL SIGNATURE				
followi	uer has duly caused this notice to be signed by the under ng signature constitutes an undertaking by the issuer to of its staff, the information furnished by the issuer to any	o furnish to the U.S. Se	curines and I	Exchange Cor	nmission, upon	505, the written
,	Print or Type) Partners I, L.P.	Signature K		Date 9/0	1/07	ı
	f Signer (Print or Type) Goldman	Title of Signer (Print or General Partner	Type)	*		 !
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		TTENTION				1

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)